# TENNESSEE GENERAL ASSEMBLY FISCAL REVIEW COMMITTEE



### FISCAL NOTE

SB 1623 – HB 2237

February 10, 2016

**SUMMARY OF BILL:** Requires, as of January 1, 2017, any legislation containing a mandated health benefit that excludes the TennCare program or any state or local insurance program from the application of the mandate to be referred to the Department of Commerce and Insurance and the Bureau of TennCare, after bill filing deadline each year for both the House of Representatives and Senate of the General Assembly, to evaluate:

- whether federal law prohibits applying the mandate to the TennCare program;
- the rational basis, if any, for requiring the mandated coverage in the private market while not requiring the mandate for managed care organizations' (MCOs) participation in the TennCare program and for insurance providers in the state insurance programs;
- a recommendation as to whether the mandate is appropriate for MCOs in the TennCare program and for insurance providers in state insurance programs; and
- any other information regarding the bill that the Department or Bureau believe will assist the standing committee when considering the bill.

Requires the Department of Commerce and Insurance and the Bureau of TennCare to report their findings to the standing committees no later than April 1 each year.

#### **ESTIMATED FISCAL IMPACT:**

#### **NOT SIGNIFICANT**

#### Assumption:

• Based on information provided by the Department of Commerce and Insurance and the Bureau of TennCare, it is estimated that the report can be produced with existing resources without an increased appropriation or reduced reversion.

#### **IMPACT TO COMMERCE:**

**NOT SIGNIFICANT** 

## Assumption:

• The proposed legislation does not expand coverage for any current mandated services. Any fiscal impact on insurers will be not significant.

## **CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.

Krista M. Lee, Executive Director

Krista M. Lee

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